



JOHN ENGLER
Governor

OFFICE OF RETIREMENT SERVICES

JUDGES RETIREMENT SYSTEM PUBLIC SCHOOL EMPLOYEES RETIREMENT SYSTEM

STATE EMPLOYEES RETIREMENT SYSTEM STATE POLICE RETIREMENT SYSTEM

DEFINED CONTRIBUTION PLAN DEFERRED COMPENSATION PLANS

PO Box 30171, Lansing, MI 48909-7671 <http://www.state.mi.us/dmb/ors/>

Telephone: 517-322-5103 Outside Lansing: 800-381-5111

State Police Application for Retirement

NAME	SOCIAL SECURITY NUMBER*	DATE OF BIRTH*
CLASSIFICATION/TITLE	DEPARTMENT	LAST DAY ON PAYROLL
CITY, STATE, ZIP	RETIREMENT EFFECTIVE DATE	HOME PHONE WORK PHONE

I am a member of the State Police Retirement System, and with this application, apply for retirement from service.

I understand that the effective date of my retirement must be no less than 30 days, but no more than 90 days, from the date this application is received by the Retirement System. I further understand that my effective date must be the first date of the month following my last day on payroll with the Department of State Police.

SIGNATURE OF MEMBER	DATE
SIGNATURE OF WITNESS	DATE

YOUR FIRST MONTHLY PENSION CHECK MUST BE MAILED TO A HOME ADDRESS. A letter concerning benefit information and your pension amount will precede your first pension check. You will receive an Electronic Funds Transfer (EFT) Application at that time. If you would like your pension check to go to your bank or other financial institution, complete the EFT application and return it to the address on the application. It will be processed in approximately two months from the date of receipt. Your pension check will continue to be mailed to your home until the EFT takes effect.

**Return completed forms to: Office of Retirement Services
P.O. Box 30171
Lansing, Michigan 48909**